

File Original and First Copy with
Department of EcologySecond Copy—Owner's Copy
Third Copy—Driller's Copy

WATER WELL REPORT

STATE OF WASHINGTON

Start Card No.

Water Right Permit No.

(1) OWNER: Name Ferry SwansonAddress Box 1047 CLINTON WA 98236(2) LOCATION OF WELL: County ISLANDN 1/4 NE 1/4 Sec. 14 T. 28 N. R. 3E W.M.

(2a) STREET ADDRESS OF WELL (or nearest address)

(3) PROPOSED USE: ☐ Domestic ☐ Industrial ☐ Municipal ☒
☐ DeWater ☐ Test Well ☐ Other ☐

(10) WELL LOG or ABANDONMENT PROCEDURE DESCRIPTION

(4) TYPE OF WORK: Owner's number of well
(If more than one)Abandoned ☐ New well ☒ Method: Dug ☐ Bored ☐
Deepened ☐ Cable ☒ Driven ☐
Reconditioned ☐ Rotary ☐ Jetted ☐(5) DIMENSIONS: Diameter of well 6 inches.
Drilled 565 feet. Depth of completed well _____ ft.

(6) CONSTRUCTION DETAILS:

Casing installed: 6 " Diam. from 0 ft. to 532 ft.
Welded ☒ " Diam. from _____ ft. to _____ ft.
Threaded ☐ " Diam. from _____ ft. to _____ ft.Perforations: Yes ☐ No ☐

Type of perforator used _____

SIZE of perforations _____ in. by _____ in.

_____ perforations from _____ ft. to _____ ft.

_____ perforations from _____ ft. to _____ ft.

_____ perforations from _____ ft. to _____ ft.

Screens: Yes ☐ No ☐

Manufacturer's Name _____

Type _____ Model No. _____

Diam. _____ Slot size _____ from _____ ft. to _____ ft.

Diam. _____ Slot size _____ from _____ ft. to _____ ft.

Gravel packed: Yes ☐ No ☐ Size of gravel _____

Gravel placed from _____ ft. to _____ ft.

Surface seal: Yes ☒ No ☐ To what depth? 18 ft.Material used in seal 18" of 1/2"Did any strata contain unusable water? Yes ☐ No ☐

Type of water? _____ Depth of strata _____

Method of sealing strata off _____

(7) PUMP: Manufacturer's Name _____

Type: _____ H.P.

(8) WATER LEVELS: Land-surface elevation above mean sea level 275 ft.Static level 275 ft. below top of well Date _____

Artesian pressure _____ lbs. per square inch Date _____

Artesian water is controlled by _____ (Cap, valve, etc.)

(9) WELL TESTS: Drawdown is amount water level is lowered below static level

Was a pump test made? Yes ☐ No ☐ If yes, by whom? _____

Yield: _____ gal./min. with _____ ft. drawdown after _____ hrs.

" " " " " "

" " " " " "

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)

Time Water Level Time Water Level Time Water Level

Date of test _____

Bailer test _____ gal./min. with _____ ft. drawdown after _____ hrs.

Airstest _____ gal./min. with stem set at _____ ft. for _____ hrs.

Artesian flow _____ g.p.m. Date _____

Temperature of water _____ Was a chemical analysis made? Yes ☐ No ☐

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of information.

MATERIAL	FROM	TO
TOP SOIL Brown	0	1
CLAY Brown	1	15
CLAY GRAY	15	60
CLAY GREEN	60	68
CLAY Brown	68	72
CLAY GR	72	80
SANDY CLAY BR	80	95
CLAY BR	95	102
CLAY GRAVEL GR	102	104
CLAY GR	104	112
CLAY SAND BR	112	127
CLAY SAND GR	127	170
SILT GR w.w.	170	184
CLAY GR	184	205
CLAY SILT GR	205	302
CLAY SAND GR	302	325
LAYER SILT w.w. GR	325	335
CLAY SILT GR	335	368
SILT w.w. GR	368	382
HARD SAND PACKED GR	382	390
CLAY SILT GR	390	400
FINE HARD PACKED SAND GR	400	405
SILT w.w. GR	405	450
CLAY SOFT GR	450	455
SILT w.w. GR	455	465
CLAY SOFT GR	465	492
CLAY GR	492	496
CLAY SOFT GR	496	497
SILT w.w. GR	497	500
CLAY GR	500	502
SAND w. SEP SAILL GR	502	505
HARD PACKED GRAVEL GR	505	510
CLAY in Rock GR	510	517

Work started 9/10, 1993 completed 11/10, 1993

WELL CONSTRUCTOR CERTIFICATION:

I constructed and/or accept responsibility for construction of this well, and its compliance with all Washington well construction standards. Materials used and the information reported above are true to my best knowledge and belief.

NAME ARNOLDS ISLAND Well Drilling
(PERSON, FIRM, OR CORPORATION) (TYPE OR PRINT)Address 5863 So Maxwelton Rd
98260(Signed) Jan H. K. License No. 0264
(WELL DRILLER)Contractor's
Registration
No. ARNOL-072MF Date 12-1, 1993

(USE ADDITIONAL SHEETS IF NECESSARY)

28/3/14 A 451
Star Card No. 1254
Light Permit No. 28/3/14

Water Right Permit No.

Department of Ecology Well Log Image System